

P.O. Box 10631  
12815 Statesville Road  
Huntersville, NC 28078

**PRIORITY**

DEAL # \_\_\_\_\_

Date 08/19/2019

Sales Rep. George Billett

(704) 875-3232  
803-366-5650 Fax

Name Phil Gibbons Cobuyer \_\_\_\_\_

Home# \_\_\_\_\_ Cell# (704) 808-0277 Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ St \_\_\_\_\_ Zip \_\_\_\_\_ DOB //

NEW	Stock# <u>HP744577</u>	Vin Number <u>1C4AJWAG4FL744577</u>	Cyl <u>5</u>	Yr <u>2015</u>
USED	Make <u>Jeep</u>	Model <u>Wrangler</u>	Body <u>Sport</u>	2dr 4x4
5 SP	Color <u>Billet Silver</u>	Mileage <u>16600</u>	Email <u>phil@gibbonsleis.com</u>	
AUTO				

<input type="checkbox"/> Copy of Drivers License	MSRP <u>42,000.00</u>
<input type="checkbox"/> Completed Mgm't Signed Appraisal Form	ACCESSORIES OR WE OWE <u>.00</u>
<input type="checkbox"/> Title to Trade	OIL CHANGES FOR LIFE <u>.00</u>
<input type="checkbox"/> Completed Payoff Info. (15 day)	STATE INSPECTION FOR LIFE <u>.00</u>
<input type="checkbox"/> Registration/Copy of Plate	TOWING FOR LIFE <u>.00</u>
<input type="checkbox"/> Completed/Signed Credit Application	PRIORITIES FOR LIFE <u>.00</u>
<input type="checkbox"/> Privacy Notice <input type="checkbox"/> Risk Based Pricing	\$2400 VALUE <u>.00</u>
<input type="checkbox"/> We Owe <input type="checkbox"/> ITPP	
<input type="checkbox"/> Carfax/Buyers Guide <input type="checkbox"/> Accessory Sheet	
<input type="checkbox"/> Insurance Completed & Verified	
<input type="checkbox"/> Owner Survey	

PAYOUT TO:	LIEN TO	SUB TOTAL <u>42,000.00</u>
ADDRESS	ADDRESS	SALES TAX <u>173.97</u>
ACCT. #		SRVC AGREEMENT <u>.00</u>
AMT. <u>31,870.00</u>	DATE	CLOSING FEE <u>799.00</u>
GOOD UNTIL <u>8/19/2019</u>		TAG/TITLES FEE <u>218.00</u>
PER DIEM		TOTAL CASH PRICE <u>43,190.97</u>
QUOTED BY		
VERIFIED BY	RECEIPT #	PAYMENT WITH ORDER - Not Returnable After 7 Days.

TRADE I.D. NO. <u>1C4BJWFG1FL572165</u>	5000 COVERED BY COMPANY	
YEAR <u>2015</u>	MAKE <u>JEEP</u>	MODEL <u>WRANGLER UNLIMITED</u>
BODY <u></u>	COLOR <u></u>	MILEAGE <u>26685</u>
ALLOWANCE <u>37,000.00</u>	BALANCE OWED <u>31,870.00</u>	NET EQUITY <u>5,130.00</u>
INSURANCE AGENT <u></u>	PARTIAL PAYMENT <u>7,060.97</u>	
ADDRESS <u></u>	TOTAL DOWN PAYMENT <u>12,190.97</u>	UNPAID BALANCE <u>31,000.00</u>
PHONE NUMBER <u></u>		
INSURANCE COMP. <u></u>		
POLICY NUMBER <u></u>		
EFFECTIVE DATES <u></u>		
DEDUCTIBLE <u></u>	COLL. COMP. <u></u>	
VERIFIED BY <u>H.F.</u>	Signature <u></u>	